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I hereby revoke all previous powers of attorney given in the patent and/or application identified herein.

[ ] A Power of Attorney is submitted herewith.

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[X] I hereby appoint the practitioners associated with the Customer Number: 000040401 for the patent(s)/application(s) identified herein.

Practitioner Under Cust. No.: Abraham Hershkovitz, Reg. No. 45,294

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[X] Applicant/Inventor and Patentee

[ ] Assignee of entire interest

**APPLICATION NUMBER**

**FILING DATE**

<u>95/001,484</u>	<u>11/12/2010</u>
<u>12/780,559</u>	<u>05/14/2010</u>

**PATENT NUMBER**

**ISSUE DATE**

<u>5,900,444</u>	<u>05/04/1999</u>
<u>6,558,732</u>	<u>05/06/2003</u>
<u>6,596,818</u>	<u>07/22/2003</u>
<u>6,656,550</u>	<u>12/02/2003</u>
<u>7,728,049</u>	<u>06/01/2010</u>
<u>7,749,585</u>	<u>07/06/2010</u>

\*

Signature of Applicant/Inventor and Patentee or Assignee of Record

The below-signed individual is the Applicant/Inventor and Patentee, or is authorized to act on behalf of Assignee of entire interest, in the patents/applications identified herein.

Printed Name and Title of Signatory (if acting for Assignee) or Applicant/Inventor and Patentee Alan Zamore

Signature

Date

1/19/2011

Any additional patents or signatures necessary are submitted on additional pages.  
Additional Pages Attached: \_\_\_\_\_